## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

P.O. Box 1450 Alexandria, Virginia 22313-1450

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be

the current corresponde	priate. All further corresp nce address as indicated t cating a separate "FEE Al	unless correct	ed below or	directed otherwise in Bloc	otification of maintenance ik 1, by (a) specifying a ne	tees will be mailed to w correspondence
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections 2673 7590 01/26/2007			or use Block 1)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
FISH & RICHARDSON P.C. P.O. Box 1022				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.		
Minneapolis, MN 55440-1022				(Oepositor's name)		
				(Signature)		
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/909,857	07/23/2001	Francis Mac		acDougall	12121-002001	8772
TITLE OF INVENTION: VIDEO-BASED IMAGE CONTROL SYSTEM						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	04/26/2007
EXAMINER AR		ART	UNIT	CLASS-SUBCLASS		
DHARIA, PRABODH M. 26			73		ı	
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      [ ] Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the pattern front page, list (1) the names of up to Projected pattern than tempers or upon to Replaced pattern than tempers or upon to Replaced pattern than the pattern than			
[ ] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PIEASEN DOTE Chiesas an assignes is identified below, no assignee data and appear on the patient Inclusion of assignee data is only appropriate when an assignment has bee previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE (CITY and STATE OR COUNTRY)						
GestureTek, Inc. New York, NY						
Please check the appropriate assignee category or categories (will not be printed on the patent): [ ] individual [X] corporation or other private group entity [ ] government						
4a. The following fee(s) are enclosed:  [X] Issue Fee [X] Publication Fee (No small entity discount permitted)  [] Advance Order - # of Copies			Ab. Payment of Fee(s):   A check in the amount of the fee(s) is enclosed.   Payment by credit card. Form PTO-2038 is attached.   X   The Director is breely authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Numbre (6-210) (enclose an extra copy of this form).			
	(from status indicated above) MALL ENTITY status. See 37	CFR 1.2.7.	[ ]b. App	licant is no longer claiming SN	MALL ENTITY status. See 37 C	CFR 1.27(g)(2).
The Director of the USPTO NOTE: The issue Fee and P shown by the records of the	ublication Fee (if required) wi	Fee and Publica Il not be accepte emark Office.	tion Fee (if any d from anyone	) or to re-apply any previously other than the applicant, a regi	paid issue fee to the application stered agent or; or the assignee	identified above. or other party in interest as
(Authorized Signature)				(Date) April 26, 2007		
Typed or Printed Name David E. A. Jordan				Registration No. 50,325		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by USC 1.22 and 37 CFR 1.41. This collection is estimated to the IZ minutes to complete, including gathering, preparing, and accordanting the completed application form to the USPTO in true will vary depending upon the individual case. Any commences on the amount of the required to complete this complete the compl						

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.